



APPLICATION FOR RECORDS RETENTION SCHEDULE

OFFICE OF THE SECRETARY OF STATE
DEPARTMENT OF ARCHIVES AND HISTORY
RECORDS MANAGEMENT DIVISION

INSTRUCTIONS: See Publication No. 78-RM-1 for instructions on completing this form. Forward signed original to Department of Archives and History, Records Management Division, 330 Capitol Avenue, Atlanta, Georgia, 30334, Attention: Scheduling Section.

FOR AGENCY USE		FOR RECORDS MANAGEMENT USE	
Application Date May 24, 1977	1. Agency Address Georgia Department of Human Resources Division of Physical Health Maternal Health Section - Room 365-S 47 Trinity Avenue, S. W. Atlanta, Georgia 30334	Application Number 77-186	
Application Number DHR-141		Date Received JUN 29 1977	Date Completed JUL - 6 1977
2. Person to Contact Miss Jewell Callahan		Working Title Administrative Officer	Telephone Number 656-4830
3. Action Requested a. <input checked="" type="checkbox"/> Establish Retention Schedule; record will continue to accumulate. b. <input type="checkbox"/> Dispose of present accumulation; no further accumulation anticipated. c. <input checked="" type="checkbox"/> Amend Application No. D-76-48 Check One: <input type="checkbox"/> Change; <input checked="" type="checkbox"/> Supersede; <input type="checkbox"/> Void			
4. Dates of Series Earliest 1972	Latest to present	5. Records Series Title (followed by title used in office; if different) MATERNAL HEALTH SERVICE REPORT FILES	
6. Division and Office Function What is the function of the Division and the Office in which this record series is created? The Division of Physical Health is responsible for the administration, direction, and coordination of the Physical Health programs throughout Georgia. This is accomplished by the establishment of health standards for business, housing, field operations, and hospitals; the improvement of the physical and dental health of adults and children; the diagnosis and control of diseases; the supervision of construction and licensure of health facilities; and the daily State-wide program of registration, statistical coding, certification and preservation of the births, marriages, divorces and annulments of marriage, and deaths that occur each year in the State. The Maternal Health Section, in the attempt to improve the quality of family life of women in child-bearing years, is responsible for promoting and supporting all maternal health activities of Service Areas and local Human Resources staffs; to monitor service standards, policies and procedures; provide technical assistance and training; and to direct technical coordination of all agencies concerned.			
7. Record Series Description This file contains the following documents (include form numbers and titles, if any): Attach samples of the file. Documents relating to: reporting (to the Maternal Health Section by each county of the State) health services to women during the child-bearing years. Included are: form HC 2.9 (Revised 4-71) Georgia Department of Public Health "Maternal Health Service Report" -- submitted monthly and shows number of prenatal admissions by number of women admitted (white and non-white); period of gestation (under 16 weeks - 16 thru 27 weeks - 28 thru 36 weeks); postpartum admissions by number of women admitted (white and non-white); total visits (admissions and return visits by white and non-white women). Also shown is type of service -- prenatal clinic; postpartum clinic; antepartum nurse home visit; delivery attended nurse home visit; and referral to private physician; number of women admitted with Hgb. less than 12 grms and number of women started on Imferon. An annual summary report (on same form) of all reports submitted by all counties during a particular year is also included. File is arranged: alphabetically by county.			
8. Monthly Reference Rate How often are records referred to which are: One to six months old 1-3; Seven to twelve months old; Thirteen to twenty-four months old; twenty-five months and older			
9. Annual Rate of Accumulation of Records Letter-size drawers 1/4; Legal-size drawers; Shelves; Other (specify)			

YES	NO	10. Questionnaire (Place an "X" in the proper column)
	X	a. Is this the official copy of the series? If not, where is it?
	X	b. Does the series contain confidential information requiring security handling? If yes, cite law or regulation.
	X	c. Is this a vital record?
	X	d. Does this series have historical or long term research value?
	X	e. When one or two documents in the file make it necessary to keep the entire file for a long period, could these documents be scheduled separately?
	X	f. Is the information contained in this series ever published? If yes, attach copy.
	X	g. Is the information contained in this series ever analyzed and/or recorded in a summarized report? If yes, attach copy.
	X	h. Is there a duplication of this series in your office, or in another office or agency? If yes, where?
	X	i. Is this series (or a major portion of it) regularly microfilmed?
	X	j. Does the record series result in a computer printout?

11. Retention Requirements The following requires the series to be kept:

a. State Law	_____ years.	d. Audit period	_____ years.
b. Statute of limitation	_____ years.	e. Administrative need (in office)	1 _____ years.
c. Federal law	_____ years.	f. Federal retention instructions	_____ years.

Attach copy or excerpt of laws or regulations. Explain administrative need.

State Archivist has seen these records and asked that they be transferred to the State Archives

12. Approved Disposition Instructions This agency recommends that the file series be cut off at the end of each:

☐ Calendar Year; ☒ Fiscal Year; ☐ Other _____ then,

☒ Hold in the current files area _____ month(s) 1 _____ year(s); then

☐ Transfer to local holding area; hold _____ year(s); then

☐ Transfer to State Records Center; hold _____ year(s); then

☐ Destroy.

☒ Transfer to State Archives for permanent retention.

☐ Other (Specify)

These instructions apply to all prior and future accumulations of the series.

Agency Head/Designee (Signature)	Date	Records Management Officer (Signature)	Date
*Richard Sullivan	5/10/77	Elizabeth Crank	5/12/77
Recommendations in paragraph 12 are approved. (If disapproved, attach letter of explanation.)		State Records Committee (Signature)	Date
		State Auditor/Designee	7-5-77
		Secretary of State/Designee	7-1-77
		Attorney General/Designee	7-5-77



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DEPARTMENT OF ARCHIVES AND HISTORY
RECORDS MANAGEMENT DIVISION

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FOR AGENCY USE		FOR RECORDS MANAGEMENT USE	
Application Date December 13, 1976	1. Agency Address Georgia Department of Human Resources Division of Physical Health Maternal Health Section - Room 365-S 47 Trinity Avenue, S. W. Atlanta, Georgia 30334	Application Number D-76-48	Date Received DEC 21 1976
Application Number DHR-125	2. Person to Contact Miss Jewell Callahan	Working Title Administrative Officer	Date Completed Telephone Number 656-4830
3. Action Requested a. <input type="checkbox"/> Establish Retention Schedule; record will continue to accumulate. b. <input checked="" type="checkbox"/> Dispose of present accumulation; no further accumulation anticipated. c. <input type="checkbox"/> Amend Application No. _____ Check One: <input type="checkbox"/> Change; <input type="checkbox"/> Supersede; <input type="checkbox"/> Void			
4. Dates of Series Earliest _____ Latest _____ 1972 1975	5. Records Series Title (followed by title used in office, if different) MATERNAL HEALTH SERVICE REPORT FILES		
6. Division and Office Function What is the function of the Division and the Office in which this record series is created? The Division of Physical Health is responsible for the administration, direction, and coordination of the Physical Health programs throughout Georgia. This is accomplished by the establishment of health standards for business, housing, field operations, and hospitals; the improvement of the physical and dental health of adults and children; the diagnosis and control of diseases; the supervision of construction and licensure of health facilities; and the daily State-wide program of registration, statistical coding, certification and preservation of the births, marriages, divorces and annulments of marriage, and deaths that occur each year in the State. The Maternal Health Section, in the attempt to improve the quality of family life of women in child-bearing years, is responsible for promoting and supporting all maternal health activities of Service Areas and local Human Resources staffs; to monitor service standards, policies and procedures; provide technical assistance and training; and to direct technical coordination of all agencies concerned.			
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8. Monthly Reference Rate How often are records referred to which are: One to six months old _____; Seven to twelve months old _____; Thirteen to twenty-four months old _____; twenty-five months and older _____?			
9. Annual Rate of Accumulation of Records Letter-size drawers <u>14</u> ; Legal-size drawers _____; Shelves _____; Other (specify) _____ for State Archives			

YES	NO	10. Questionnaire (Place an "X" in the proper column)
	X	a. Is this the official copy of the series? If not, where is it?
	X	b. Does the series contain confidential information requiring security handling? If yes, cite law or regulation.
	X	c. Is this a vital record?
	X	d. Does this series have historical or long term research value?
	X	e. When one or two documents in the file make it necessary to keep the entire file for a long period, could these documents be scheduled separately?
	X	f. Is the information contained in this series ever published? If yes, attach copy.
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	X	i. Is this series (or a major portion of it) regularly microfilmed?
	X	j. Does the record series result in a computer printout?

11. Retention Requirements

The following requires the series to be kept:

- | | | | |
|--------------------------|--------------|-----------------------------------|--------------|
| a. State Law | _____ years. | d. Audit period | _____ years. |
| b. Statute of limitation | _____ years. | e. Administrative need | _____ years. |
| c. Federal law | _____ years. | f. Federal retention instructions | _____ years. |

one-time standard -- to dispose of present accumulation.

Attach copy or excerpt of laws or regulations. Explain administrative need.

The State Archivist requested that these records be sent to the Archives

12. Approved Disposition Instructions

This agency recommends that the file series be cut off at the end of each:

☐ Calendar Year; ☐ Fiscal Year; ☐ Other _____ then.

- ☐ Hold in the current files area _____ month(s) _____ year(s); then
- ☐ Transfer to local holding area; hold _____ year(s); then
- ☐ Transfer to State Records Center; hold _____ year(s); then
- ☐ Destroy.
- ☒ Transfer to State Archives for permanent retention.
- ☐ Other (Specify) _____

These instructions apply to all prior and future accumulations of the series.

Agency Head/Designee (Signature)	Date	Records Management Officer (Signature)	Date
<i>Robert Shuller</i>	12/14/76	<i>J. Lavette M. Crane</i>	12/13/76
State Records Committee (Signature)		Date	
State Auditor/Designee		1-4-77	
Secretary of State/Designee		1-4-77	
Attorney General/Designee		1-4-77	

Recommendations in paragraph 12 are approved.
(If disapproved, attach letter of explanation.)